



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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**REPORT OF EXPENDITURES, CONTRIBUTIONS
AND SUBJECT AREAS**

(To be filed by organizations, employing organizations, others)

For lobbying reporting period:

- ☒ January 1 - last day of February
☐ March 1 - April 30
☐ May 1 - December 31

RECEIVED

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STATE OF HAWAII
STATE ETHICS COMMISSION

Name of contact person Scott Sigman Phone 360-943-3466
Name of organization Schering-Plough External Affairs
Mailing address 8846 Walker Ct. SW
Olympia, WA 98512

PART I. TOTAL EXPENDITURES

The total sum or value of all expenditures for the purpose of lobbying during the statement period was: \$ 4,000

EXPENDITURES

Category	Total Amount	Category	Total Amount
1. Preparation & distribution of lobbying materials	NA	7. Entertainment	NA
2. Media advertising	NA	8. Food & beverages	NA
3. Telegraph, telephone and other forms of telecommunication	NA	9. Gifts	NA
4. Postage	NA	10. Loans	NA
5. Compensation paid to lobbyists	\$4,000	11. Other disbursements	NA
6. Fees (other than to lobbyists)	NA	TOTAL EXPENDITURES	\$4,000

COMPENSATION PAID TO LOBBYISTS

List in this section the names of all lobbyists and compensation paid to the lobbyists during the statement period.

Name	Address	Compensation paid
<u>Bob Ogawa & Sharon Ogawa</u>	<u>1188 Bishop Street Suite 3105</u> <u>Honolulu, Hawaii 96813</u>	<u>\$ 4,000</u>

EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

List in this section all expenditures incurred for the purpose of lobbying of \$25 or more per person per day during the statement period.

☐ This section is not applicable

☐ Expenditures incurred in the total sum of \$25 or more per person per day were made for the following persons:

Name & Address

Amount or value

NA

AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON

List in this section all expenditures incurred for the purpose of lobbying in the total sum of \$150 or more per person during the statement period.

☐ This section is not applicable

☐ Expenditures incurred in the aggregate of \$150 or more per person were made for the following persons:

Name & Address

Amount or value

NA

PART II. CONTRIBUTIONS RECEIVED

List in this section all contributions received for the purpose of lobbying in the total sum of \$25 or more per person during the statement period.

☐ This section is not applicable

☐ Contributions received in the total sum of \$25 or more per person were received from the following persons:

Name & Address

Amount or value

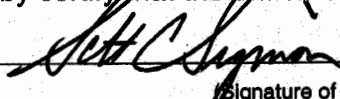
NA

PART III. SUBJECT AREAS OF LOBBYING

Legislative and/or administrative action in the following areas was supported or opposed during the statement period:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input checked="" type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | |

I hereby certify that the statements made above are correct and complete to the best of my knowledge



(Signature of authorized person)

3/7/03

(Date)

Name of authorized person (type or print)

Scott Sigman

Title of authorized person